

TALKING POINTS – WEEK 3 MEDIA BRIEFING
Kaiser Kidney Transplant Center
June 1, 2006

Good Morning. My name is Cindy Ehnes and I am Director of the Department of Managed Health Care for California. Thank you for being on this third weekly briefing call on the Kaiser kidney transplant program transition.

Since last week's call when we explained the prioritization of the 2,000 Kaiser kidney patients, the DMHC, Kaiser, UCSF, and UCD teams have been working earnestly to begin the actual transfer process. We have thoroughly discussed the extremely complex issues involved in transitioning these patients and we have established protocols that are designed to ensure patient safety during the transfer process.

By most accounts, the transition is progressing well. Patients are being contacted with meaningful information, the alternate centers are willing and eager to help, and transplantations will soon resume.

This past week, Kaiser has contacted patients in Group 1 to determine their preference for UCSF or UCD. Approximately 65% have chosen UCSF, 25% picked UCD, and the remaining individuals have not decided. Kaiser has been preparing the medical records and securing the necessary authorizations to complete the transfer of these patients. The first group of medical records has been delivered to UCSF, and some of the initial group of medical records for UCD has been delivered as well.

UCSF will review the patient medical charts within 24 hours of receipt. Patients with a living donor can be seen within two weeks, and be given a surgery date within three weeks. If the patient is waiting for a donor kidney, UCSF will work with UNOS to move the patient from the Kaiser list to the UCSF list. Once the transfer has been confirmed UCSF will send the patient a letter of acceptance and will also contact the patient within five business days to set up an appointment.

UCD will review the medical records it receives within one week to determine the patient's suitability for transplant. For patients who have live donors, UCD can begin to schedule surgery beginning the week of June 6 at

the rate of four transplants a week. For patients awaiting a donor kidney, UCD will schedule patient appointments during the week of June 5.

Until the patients have been transitioned to their alternate facilities, Kaiser will continue to provide all necessary medical care, including transplantation if a kidney becomes available.

Simultaneously, both UC centers will begin seeing patients who are awaiting an initial evaluation for list eligibility. Our goal is to place these patients on the UNOS transplant list as soon as possible so that they can begin to accrue waiting time. Both UC systems will begin scheduling evaluations first with the patients who have been waiting the longest.

The next group of patients, and by far the largest, to be transitioned are those patients currently on Kaiser's transplant list who are not expected to be scheduled for surgery in the immediate future. Beginning mid-June, we expect to begin transferring these patients in blocks of approximately 100 patients each week. We want to ensure that the processes that have been established for the high priority group are working smoothly before we accelerate the pace of patient transfers.

We recognize that during this transition period, there is a possibility that one of these patients could be identified for an accelerated transplant based on a perfect donor match determination – sometimes referred to as a zero mismatch. Should this occur before the patient's transfer is completed, Kaiser will be available to perform the transplant surgery.

We are proceeding cautiously to ensure that the transfer protocols we have established provide adequate patient protection.